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APPLICATION NO.	FILING DATE	I	FIRST NAMED INVE	NTOR ATTORNEY DOCKET NO. CONFIRMATION NO.		
10/603,943	06/26/2003		Kouji Hattori	40 /00 /000E	MDANTE2 00000031 10	603943 3410
TITLE OF INVENTION: A	MINOALCOHOL DERIVA	TIVES		}	UDHUIES AAAAAA 14	
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APPLN, TYPE	SMALL ENTITY	ISSUE FE	EE P	UBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400		\$300	\$1700	02/14/2006
EXAM	EXAMINER		т С	LASS-SUBCLASS) ·	
CHANG, CELIA C		1625		514-534000	•	
1. Change of correspondence CFR 1.363). Change of correspond	ence address (or Change of	`	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a 2 McCLELLAND, MAIER			
Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 2 MCCLELLAND, WALLY 3 & NEUSTADT, P.C.			
PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.						
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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.						
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)						
ASTELLAS PHARMA INC. Tokyo, JAPAN						
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🏝 Corporation or other private group entity 🚨 Government						
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Authorized Signature	etta fo.		Date	DEC 1 9 2		
Typed or printed name	Joseph Scale	tta, Jr.		Registration	No. Reg. No. 26	,803
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